

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2000

Application or Docket Number  
*71001257*

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |                      |                          |
|----------------------------------|----------------------|--------------------------|
| TOTAL CLAIMS                     | <i>17</i>            | <i>17</i>                |
| FOR                              | NUMBER FILED         | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | <i>17</i> minus 20 = | <i>0</i>                 |
| INDEPENDENT CLAIMS               | <i>1</i> minus 3 =   | <i>0</i>                 |
| MULTIPLE DEPENDENT CLAIM PRESENT |                      | <input type="checkbox"/> |

\* if the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE

OR OTHER THAN  
SMALL ENTITY

|           |        |
|-----------|--------|
| RATE      | FEES   |
| BASIC FEE | 355.00 |
| XS 9=     |        |
| X40=      |        |
| +135=     |        |
| TOTAL     |        |

|           |            |
|-----------|------------|
| RATE      | FEES       |
| BASIC FEE | 710.00     |
| XS18=     |            |
| X80=      |            |
| +270=     |            |
| TOTAL     | <i>110</i> |

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |   |
|--|---|---|--------------------------|---|
|  |   |   | MINUS                    | = |
| Total  | <i>* 14</i>                               | <i>20</i>                                   |                          |   |
| Independent                                    | <i>* 3</i>                                | <i>3</i>                                    |                          |   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   | <input type="checkbox"/> |   |

SMALL ENTITY

OR OTHER THAN  
SMALL ENTITY

|                    |                        |
|--------------------|------------------------|
| RATE               | ADDI-<br>TIONAL<br>FEE |
| XS 9=              |                        |
| X40=               |                        |
| +135=              |                        |
| TOTAL<br>ADDT. FEE |                        |

|                    |                        |
|--------------------|------------------------|
| RATE               | ADDI-<br>TIONAL<br>FEE |
| XS18=              |                        |
| X80=               |                        |
| +270=              |                        |
| TOTAL<br>ADDT. FEE |                        |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |   |
|--|---|---|--------------------------|---|
|  |   |   | MINUS                    | = |
| Total  |   |   |                          |   |
| Independent                                    |   |   |                          |   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   | <input type="checkbox"/> |   |

|                    |                        |
|--------------------|------------------------|
| RATE               | ADDI-<br>TIONAL<br>FEE |
| XS 9=              |                        |
| X40=               |                        |
| +135=              |                        |
| TOTAL<br>ADDT. FEE |                        |

|                    |                        |
|--------------------|------------------------|
| RATE               | ADDI-<br>TIONAL<br>FEE |
| XS18=              |                        |
| X80=               |                        |
| +270=              |                        |
| TOTAL<br>ADDT. FEE |                        |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |   |
|--|---|---|--------------------------|---|
|  |   |   | MINUS                    | = |
| Total  |   |   |                          |   |
| Independent                                    |   |   |                          |   |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |   | <input type="checkbox"/> |   |

|                        |
|------------------------|
| ADDI-<br>TIONAL<br>FEE |
|                        |
|                        |
|                        |
|                        |

|                        |
|------------------------|
| ADDI-<br>TIONAL<br>FEE |
|                        |
|                        |
|                        |
|                        |